

American College of Cardiology. If the user is a male with atypical angina, then he has:

- a 34% risk if he is 30-39 years old (steps 819c, 819c'),
- a 51% risk if he is 40-49 years old (steps 819d, 819d'),
- a 65% risk if he is 50-59 years old (steps 819e, 819e'),
- and
- a 72% risk if he is over 60 years old (steps 819f, 819f').

If the user is a female with atypical angina, then she has:

- a 12% risk if she is 30-39 years old (steps 819g, 819g'),
- a 22% risk if she is 40-49 years old (steps 819h, 819h'),
- a 31% risk if she is 50-59 years old (steps 819i, 819i'),
- and
- a 51% risk if she is over 60 years old (steps 819j, 819j').

If the user is a male with typical angina, then he has:

- a 78% risk if he is 30-39 years old (steps 819l, 819l'),
- a 87% risk if he is 40-49 years old (steps 819m, 819m'),
- a 93% risk if he is 50-59 years old (steps 819n, 819n'),
- and
- a 94% risk if he is over 60 years old (steps 819o, 819o').

If the user is a female with typical angina, then she has:

- a 26% risk if she is 30-39 years old (steps 819p, 819p'),
- a 55% risk if she is 40-49 years old (steps 819q, 819q'),
- a 73% risk if she is 50-59 years old (steps 819r, 819r'),
- and
- a 86% risk if she is over 60 years old (steps 819s, 819s').

Figure 8H illustrates a flow chart for determining the risk that angina is CAD for a user that smokes and has diabetes and hyperlipidemia. The risk is determined based on information described in Table 10 of the paper entitled "ACC/AHA/ACP-ASIM

Guidelines for the Management of Patients with Chronic Stable Angina" published in the Journal of the American College of Cardiology. If the user is a male with atypical angina, then he has:

5 a 59% risk if he is 30-39 years old (steps 821c, 821c'),
a 70% risk if he is 40-49 years old (steps 821d, 821d'),
a 79% risk if he is 50-59 years old (steps 821e, 821e'),
and
a 86% risk if he is over 60 years old (steps 821f,
10 821f').

If the user is a female with atypical angina, then she has:

15 a 39% risk if she is 30-39 years old (steps 821g, 821g'),
a 43% risk if she is 40-49 years old (steps 821h, 821h'),
a 47% risk if she is 50-59 years old (steps 821i, 821i'),
and
a 51% risk if she is over 60 years old (steps 821j,
821j').

20 If the user is a male with typical angina, then he has:

a 88% risk if he is 30-39 years old (steps 821l, 821l'),
a 92% risk if he is 40-49 years old (steps 821m, 821m'),
a 95% risk if he is 50-59 years old (steps 821n, 821n'),
and
25 a 97% risk if he is over 60 years old (steps 821o,
821o').

If the user is a female with typical angina, then she has:

30 a 78% risk if she is 30-39 years old (steps 821p, 821p'),
a 79% risk if she is 40-49 years old (steps 821q, 821q'),
a 82% risk if she is 50-59 years old (steps 821r, 821r'),
and
a 84% risk if she is over 60 years old (steps 821s,
821s').

DOCTOR'S SECTION: Figure 9 illustrates a flow chart of the doctor's section (process 900) shown in Figure 2. This section is implemented if the user has an intermediate or high risk that his or her chest pain is CAD or the user's doctor wants a stress test. This section requires a physician's assistance for the user to complete. The user is queried regarding invasive and noninvasive testing. Invasive testing may include, for example, an angiogram. Noninvasive testing may include, for example, a stress test. In the first step, information regarding the user's risk of developing CAD is displayed (step 901). This information includes, for example, AHCPR information about the user's risk. Next, the user is prompted to enter information regarding left ventricular ejection fraction, stress imaging test results, exercise tolerance test results, and/or pattern of CAD if an angiogram was performed (steps 902-905).

COURSE OF ACTION SECTION:

Figure 10 illustrates a flow chart for the course of action section shown in Figure 2. In this section, the different courses of action, for example, pharmacological therapy, educational information, and angioplasty or surgery, are described for an individual that has CAD. The user is prompted to select a course of action (step 1001). Based on the course of action selected and the information provided by the user in doctor's section 900, a detailed description of that course of action is displayed to the user (steps 1003-1007). The detailed information includes information from, for example, the treatment section of "ACC/AHA/ACP-ASIM Guidelines for the Management of Patients with Chronic Stable Angina," and "ACC/AHA Guidelines for Coronary Artery Bypass Graft Surgery." After the user has finished viewing the requested course of action, the user may select another course of action to view (step 1008).

RISK FACTOR MODIFICATION SECTION: Figure 11 illustrates a